

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Perry Jim

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
March Air Reserve Base Joint Powers Commission

Division, Board, Department, District, if applicable Your Position
Alternate Member

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
Agency: Position:

2. Jurisdiction of Office (Check at least one box)

- State Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- Multi-County County of Riverside
- City of Other

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2020, through December 31, 2020. Leaving Office: Date Left / / (Check one circle.)
- or- The period covered is / / through December 31, 2020. The period covered is January 1, 2020, through the date of leaving office.
- Assuming Office: Date assumed / / -or- The period covered is / / through the date of leaving office.
- Candidate: Date of Election and office sought, if different than Part 1:

4. Schedule Summary (must complete) ► Total number of pages including this cover page: _____
Schedules attached
 Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached
 Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached
 Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached
-or- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
3900 Main Street Riverside CA 92522
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(951) 826-5991 Jperry@riversideca.gov

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3/29/21 (month, day, year) Signature (File the originally signed paper statement with your filing official.)